FOR INSTRUCTIONS, SEE BACK OF FORM	FORM
DISCI.OSURE SUMMARY PAGE	DR-2 DISCLOSURE
COMMITTEE NAME (Must be same as on Statement of Organization) IA ETHICS AND	(Rev. 01/2001) REPORT
triends of Jim Ly Kam CAMPAICH DISCLOSURI	For Office Use Only
IMPORTANT: Indicate type of committee you are reporting for: 2010 JAN -5 PM : (Gomm. # 397
(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee	Indexed
(8) Support State of Candidates	Computer
CANDIDATE COMMITTEES ONLY: C7009 14100000	804 0998
Candidate Name Political Party	
Jim Lykam Democrat	
05500 \$000000	
State Representative District (if Senate or House)	_
B. A. S. L. S. 1000	0-12-22
SIGNATURE OF TREASURER (or person filing this report) 533 391-1919 TELEPHONE	Jan 2, 20
TELEPHONE	DATE SIGNED
Routine Penalties Due For Late Filed Reports Range from	\$20 to \$800
SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:	
I AM FILING A Pan 19, 2010 REPORT FOR AN/A (1) ELECTION	N (2)NON-ELECTION YEAR.
(report date) Indicate	
CHECK IF AMENDMENT TO REPORT DATED Local C	Committees, enter Date of Election
	The same of the sa
Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.	& Local Committees, enter County in
(You must continue to file reports until a Notice of Dissolution is filed.)	Election is held
STATEMENT OF CASH ON HAND	
CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held	
by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)	6.843.41
ADD TOTAL MONEY TAKEN IN THIS PERIOD	*
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	8, 476, 55
Schedule F: Loans Received total (Attach Schedule F)	
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	
(Schedule H applies to Candidates' Committees Only)	
	· 15,320.16
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	•
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	8,860.10
Schedule F: Loan Repayments total (Attach Schedule F)	
CASH ON HAND at the end of this reporting period (if final report, balance must	
be zero) (Attach DR-3)	6,460.06
**UNPAID BILLS (From Schedule D - Attach Schedule D)	
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	75.00
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	
CANDIDATE COMMITTEES ONLY:	
CONSULTANT BREAKDOWN (Schedule G Attached?)	YESNO
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	

· (Including	candidate's personal fund	ds)		CHECK THIS BO	X IF
COMMITTEE NA	AME (Must be same a		AMENDING FOR		
Frie	^ /	Jim LyKam			
NUMBER AND THE I DISCLOSURE BOAR	PAC CHECK NUMBER IN 1 10.	UTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COI HE DESIGNATED COLUMN, A LIST OF ID NUMBERS IS AVAILABLE		•	
CAUTION: Section for any commercial	on 68B.32A(6), lowa Co al purpose by any pers	ode, prohibits the use of information copied from reports aron other than statutory political committees.	nd statements for s	oliciting contributio	ns or
DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
1/16/09	ID# CK#	Jin Lykam 2906 W. 35th St. Davenport Ia 52806 (over)	payment foi	\$11.55 mileage	
5/6/09	CK# '	Fred Haskins 505 5th St. Suite 729 Des Moines, In 50309	,	50.00	
5/11/09	ID# CK#	Cy Robinson 2836 W. 14h St. Davenport, Fa 52804	,	20.00	
5/12/09	LD# 6429 CK#2253	Herry Highway PAC 2415 Ingersoll Ave. Des Moires Fa 543/2		500.00	
5/12/09	ID# .	Don Brazelton 1510 n. & Trilein Dr. ankeny, Fa 50021		20.00	
5/12/09	ID# CK#	andrew Baumert 5068 Coach light Dr. West Des Moines Ta 50365		25.00	
5/12/09	ID# 6351 CK# 1557	Petroleum Marketers & Convenie Stoves of John Hork Ave STE F 4-bandale, Ta 50322	1 -	200.00	
5/12/09	ID# 6052 CK# 3352	Independent Insurance agents 4000 Westown PKwy Ste 200 West Des Moines, In 50265		200.00	
5/12/09	ID# CK#	John Pederson 1075 44th St. Des Morres Ta 50311		100.00	
5/12/09	ID# 6/01 CK#3573	Truck PAC Journ P.O. Box 6124 East Des Moines ST, Des Moines, Ja 50309	N	250.00)
L	_1	, , , , , , , , , , , , , , , , , , ,	SUB-TOTAL	s/376.53	
		TOTAL (if last page	of this schedule]

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

CONTRIBUTIONS - MONEY TAKEN IN

MONETARY

(Rev. 06/97)

RECEIPTS

CONTRÍBUTIO	ONS - MONEY TAK	 En in	(Rev. C) 06/97)	MONETAI RECEIP	
	candidate's personal fun			CHE	CK THIS BO	X IF
COMMITTEE N	AME (Must be same a	or Statement of Organization) Tim Ly Kam			NDING FOR	
NUMBER AND THE DISCLOSURE BOAT	PAC CHECK NUMBER IN T RD.	EUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION CO THE DESIGNATED COLUMN, A LIST OF ID NUMBERS IS AVAILABLE				
CAUTION: Section for any commercial	ion 68B.32A(6), Iowa C ial purpose by any pers	ode, prohibits the use of information copied from reports a on other than statutory political committees.	nd statements for s			
DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE ¹ (if applicable)		AMOUNT ECEIVED	√ IF FOR FUND- RAISER INCOME
5/12/09	ID# 9748 CK# 1079	Midwest PAL 1636 NW 114th St. Clive. Fa 50325		\$/0	100.00	
5/12/09	ID# 6/18 CK# 2644	Town Optometric association 1454-3045. STE 204 W. Des Moines, In 50266		2	00.00	
5/12/09	ID#	Thomas Cope 8532 Newbury Ct. Johnston, Ia 50/31		5	0.00	
51.100	ID# 6096	Manufactures Housing		10	00.00	

112109 CK# 1384 130 55.

Sarlham, Ia 50072

Mary Latay
1321 HIST St.

Des Moines, Ta 50311

5/10/02 CK#

10#9675 OAAI PAC

P.O. BOX 7255

250.00

TOTAL (if last page of this schedule)

SUB-TOTAL

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

ID#

CK#

ID#

Page ______of_____(for Schedule A)

\$/600.00

150.00

250.00

100.00

200.0C

OF HIGH GOOD OF A COUNTY OF THE COUNTY OF TH	Δ	MONETARY	ĺ
CONTRÍBUTIONS — MONEY TAKEN IN	(Rev. 06/97)	RECEIPTS	
(Including candidate's personal funds)	CHE	CK THIS BOX IF	
COMMITTEE NAME (Must be same as on Statement of Organization)	AME	NDING FORM	
Friends of Jim Lykam			j
		ACTIFIC ATION	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

		WALE AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	AMOUNT	√ IF FOR
DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK	NAME AND ADDRESS OF CONTRIBUTOR	TO CANDIDATE* (if applicable)	RECEIVED	FUND- RAISER
(10110222111)	NUMBER				INCOME
9/1	ID# 8073	Waste Management PAC		\$ 7 - 7 - 4 4	
13/09	CK# 8126	701 Pennsylvania Ave. N.W. Su	4	250,00	
	125	washington, account			
9/ /	ID# 6098	Joua Ber PAC 321 E. Walnut Suite 310		1,000.00	
19/09	CK#3653	Des Moines In 50309.		1000	
0/	104 / 1	Iowa Dental association			
19/2-100	6065	5530 West Parkway Suitela	b ;	750,00	Ì
125/09	CK# 2306	Johnston. Ia 50/31		,	
10/ 1	ID# 8431	KOCH PAY			
15/09	CK# 7201	600 14th St. NW SIE 800		500.00	
11-10/	1006	Washington, DC 20005			
10/ /	ID#	C.F. Larry Barrett	1	(-0.00)	
15/09	CK#	1104 Kimberly Rd. Unit 205		50.00	
	ID# 8035	Union Pacific Corporation Fund			
10/10/		for Effective government		500.00	7
119/09	CK# 5 328	For Effective government 600 thirteenth St. NW Swite 34 washington De 20005			
101 1	1D# 6063	Iowa Dental association		- 22	
10/19/09	-	5530 West Parkway Suitel	40	50.00	
77	ск#2328	Johnston, Ia 50/3/	<u> </u>	ļ	
10/	ID# 6059	Towa Committee of Automotive 1111 Office tark Ro Retailer		100.00	
124/09	CK#3339	1111 Office Park Rd. Ketailers West Des Moines, Ia 50265		100.00	ļ
 	ID# 6058	Towa Chiropractic Society			
10/		100 East Grand ave. Swite 21	do .	250.00	
129/09	CK# 4586	Des Moines, Ja 50309		10.00	
11/	ID# 6/0/	Truck PAC Iowa			,
1/2×/na	ск# 3585	Po Box 6/2/ East Des Moines STN		250.00	
100/09	2000	Des Moines, Ia 50309			
		•	SUB-TOTAL	3 7701 00	i

TOTAL (if last page of this schedule)

"Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 3 of 4 (for Schedule A)

CONTRIBUTIONS - MONEY TAKEN IN

I VI III-LUCUTUU, TOO DUUR VI I VIIII

(Including candidate's personal funds)

COMMITTEE NAME (Mus	st be same as on Statemen	t of Organization)
Friends	of Time	LyKam
Prienas_	OT STIN	Lyrary

A (Rev. 06/97)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
12/1/09	ID# 6004 CK# 4921	associated gen. Contractors 701 E. Court Ave. 50809-4941		\$500.00	
12/ /	ID# 6351 CK#/566	Petroleum Marketers and Convenie Stores of Iowan 10430 New York Ave STEF Urbandale Ia 50322-3773	ce	250.00	
12/14/09	ID# CK#	Kathleen Janz 328 Reno St. Towa City Ia 52245	,	25.00	
12/15/09	ID# CK#	Kathy Hicklin 2690 Newport Road NE 50100, Ia 52333		35.00	
12/17/09	ID#	Eleanor Dvorchak 1229 Northwood Ln. Muscatine Fa 52761		200.00	
12/30/09	ID# CK#	Katerina Dotzeva 200 Heather Lane Wilmette IL		500.00)
12/30/09	ID# CK#	Kerry Bayer 2725 E. 165th St. Davenport, Fa 52807		100.00	
13/0/09	ID# 6059 CK# 3412	Towa Committee of Automos 1111 Office Park Rd. Retail West Des Moines Fa 50265	_	200.00)
	ID#				
	ID#				
			SUB-TOTAL	1 200.00	

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE			
B (Rev. 09/97)	MONETARY EXPENDITURES		
CHECK THIS BOX IF			

COMMITTEE	NAME (Must be s	same as on Statement of Organization)		
Fried	uds of :	Jim Lykam		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
. /	NUMBER	Porta toil	mail Campaign	
12/09	CK#/533	Postmaster 4018 Marguette Davenport, Ia 52806	1 de sont s	\$5.90
1/11/09	ID#	Jim Lykan, 2906 W. 35th St.	Reimbursee nileage 330 miles @ 58.5 Emile.	193.05
111/09	CK#/534	Daverport La 52806		
2/1/09	ID# CK#/535	U.S. Cellular P.O. Box 0203 Palatine, Il 60055-00	Monthly cell Phone bill	40.66
2/1	15.	Postmaster 4018 Navguette	Stamps	126.00
2/1	ID# 9098 CK#/537	Davenport, In 52806 Truman Fund, It 5661 Fleur Dr.	Contribution	1,900.00
3/3/09	ID# CK#/538	Des Moines, Ta 50321 U. S. Cellular P.U. Box 0103	Monthly Cell	51.45
<u>' ' ' </u>	ID# 9166 CK#/539	Palatine II 60055-020 3 Scatt Country Several P.O. Bay 2009 Farty	Contribution	180.00
	ID# CK#/540	Davenport, Ia 52809 Jim Ly Kam 2906 W. 35th St. Davenport, Ia 52806	Reimbursed Shutt	16.70
	L		SUB-TOTAL	\$25/3.76

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

Page	of	 <i>9</i>

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTEE	NAME (Must be s	ame as on Statement of Organization)		
Frie	ends of	Jim Ly Kam		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
4/2/09	ID# CK#/5-4/	U. S. Cellula P.o. Box 0203 Palatine II 60055-0203	Phone bill	\$ 51.45
4/ 1/3/09	ID# CK#1542	Quad City Times 500 East third St. Davenport, In 52801	Extra Copies Paper for Constituent work	11.25
4/13/09	CK# 5 43	Postvaster 4018 Marquette Davenport, In 52806	Mail Copies for Constituent work	4.95
4/19/09	ID# 9166 CK#/544	Scatt County Democrate P.O. BOX 2009 Farty Davesport, Fa 52809	Contribution	75.00
4/19/09	ID# CK#/545	Lulac Council 10 P.O. Box 46/6 Dayenport, Ja 52508	50th year ad	50.00
4/28/09	! ID#	320 W. Kimberly R	e. Paper, envelopes	42.32
5/1/09	104	Davenport, In 5280/ U.S. Cellular P.O. Box 0203 Palatine, Il 60055-0202	Monthly Cell Phone bill	51.65
5/4/09	ID# CK#/C//	Postmaster 4018 Marque He	Stamps	42.00

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

Page	2	of	1	<u>'</u>
Page		OI		

SUB-TOTAL

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
	CK THIS BOX IF ENDING FORM

COMMITTEE	NAME (Must be s	ame as on Statement of Organization)		
Frie	nds of	Jim Ly Kan		AMOUNT
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	EXPENDED
5/8/09	ID# CK#/549	Postnaster 4018 Marquette Davenport, Ia 52806	Stamp5	\$2.00
5/ 14/09	ID# CK#/550	Jim Ly Kam 2906 W. 35th St. Daveaport, Ia 52806	Reimbursel milenge 330 miles @ 554 mile Fundraiser Des Moines.	181.50
5/16/09	ID# CK#/55/	Postmester 4018 Marquette Davenout, Ja 52806	Stanps	132.00
5/27/09	ID#	Jim Lykam, 2906 W. 35th St. Davenport, Ia 52806	330 miles & 55t mile	181.50
6/1/09	ID# CK#/553	U. S. Cellular P.o. Box 0203 Palatine, Il 60055-000	Monthly cell	51.65
6/19/09		Embroid Me 2222 E. 53rd St. Suite Davenport, Ia 52807	Thirt for	16.05
7/1/09	ID# CK#/555	U.S. Cellular P.O. Box 0203 Palatine, II 60055-0203	morthly cell	51.65
7/13/09	ID# CK#/556	Postmaster 933 W. 2nast Davenport, In 5289	Stamps	132.00
L	<u> </u>	Carto que e, sur	SUB-TOTAL	\$ 748.35

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(I).)

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)		MONETARY EXPENDITURES
	· · · _ ·	CK THIS BOX IF

COMMITTEE NAME (Must be same as on Statement of Organization)
Friends of Jim Ly Kaw

1.71010	9		2/22005	AMOUNT
DATE	CANDIDATE ID NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE	PURPOSE (DESCRIBE TRANSACTION)	EXPENDED
EXPENDED	(if applicable)	(Disbursement) WAS MADE		
(MM/DD/YR)	AND PAC			
	CHECK NUMBER		:	
	1D# 9166	Sall () X conti		
<u>.</u>	· -	Dott County Democratic P.O. Box 2009 Party	Contribution	\$200.00
7/25/09	CK#/557	P.O. Box 2009	Copenbucion	\$000.00
700707	·	Devenport, In 52809		
1 ,	1D# 9166	Scott County Derrocratic		
7/30/09		Scott County Derrocratic 7.0. Box 2009 Party	Contribution	25.00
1/20/09	CK#/558		Corcor sue, or	
Ľ <u></u>		Davesport, Ja 52809	0	
n/1	ID#	U.S. Cellular	Northly cell Those bill	51.81
7/30/09	CK# /	P.U. BOX 0203	611	3/.0/
730/09	CK# 1559	Palatine, I/ 60055-0203	Proke Bill	
 	ID# 9098	Tion Find TI		
7//	1	Truman Fund, I.	Contribution	2,500.00
7/31/09	CK#/560	5661 Fleur Dr.	Corcination	
1-1/01		Des Noines, Ia 50321		
8/1	1D#9166	Scott County Democratic P.O. Box 2009 Party		600.00
8/4/09	1	Po. Prv 2009 Farty	Contribution	600.00
17/07	CK#/561	No. 1 2500	Coperibación	
		Daveaport Fa 52809	Andre	
13/09	ID#	Office Mark	Copies, Copy Paper	15.75
1/12/20	CK# /= / 2	320 W. Kirkberly R.P.	CROW Daves	15.15
112409	CK#1562	Davenport, Fa 52806	copy popol	
	ID#	Jim Lykam	Reimburger mileace a	
8/21/09		2906 W. 3545t.	Keimbursed mileage of	88.00
121/09	CK#/563		160 miles @ 554 mile. 9.	00.00
10,101		Devenport, In 52806	7	T
0/	1D# 9098	Truman Fund II) P	500.00
1%.	1	5661 Fleur Dr.	Contribution	500.00
26/09	CK#/564	11		_
		Des Moines, Ja 50321	SUB-TOTAL	\$2000 CI
				\$3,980.56

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

Page ______ of ____

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTEE	NAME (Must be s	same as on Statement of Organization)		
Frien	ds of 5	Jim Ly Kan		AMOUNT.
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
8/31/09	104	4. S. Cellular Ro. Box 0203 Palatine, II 60055-0203	Monthly cell Those bill	\$51.81
9/21/09	CK#/566	Jim Ly Kam 2906 W! 35th St. Davenport, Ia 52806	Reinloursement mileage 311 miles @ 55 kmile for four of commercial breeder for upcoming interim	171.05
9/23/09	10.4	Postmaster 4018 Margnette Davenport, Ia 52806	Stamp 5	132.00
10/1/09	ID# CK#/568	U.S. Cellular P.O. Box 0203 Palatine TI 60055-021	Monthly Cell	52.09
10/31/09	ID# CK#/569	4.5. Cellular P.a Box 0203 Palatine, IJ 60055-0203	monthly cell	51.75
11/8/09	ID# 9098 CK#/570	Fown Democratic Porty 566/ Fleur Dr. Des Moines, In 50321	Contribution	240.00
1/24/09	ID# CK#/57/	State Farm P.O. Box 680001 Dallas, TX 75.368-0001	Ensurance on Computer in Des Moines	50.00
12/1/09	ID# CK#/572	Postmaster 4018 Marquette Daverport, Ia 52806	Stamps	149.60
			SUB-TOTAL	\$898.30
			TOTAL (if last page of this schedule)	\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

	SCHEDULE	
1		
	В	MONETARY
ĺ	(Rev. 09/97)	EXPENDITURES
į		
		CK THIS BOX IF INDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization) PURPOSE AMOUNT CANDIDATE NAME AND ADDRESS TO WHOM EXPENDED (DESCRIBE TRANSACTION) ID NUMBER **EXPENDITURE** DATE (Disbursement) WAS MADE (if applicable) **EXPENDED** AND PAC (MM/DD/YR) CHECK NUMBER ID# \$51.75 ID# CK# ID# CK#/5 ID# ID# CK# ID# CK# ID# CK# SUB-TOTAL

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

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FOR INSTRUCTIONS, SEE BACK OF FORM	SCHEDULE	
COMMITTEE NAME (Must be same as on Statement of Organization)	(Rev. 06/97)	IN KIND CONTRIBUTIONS
Friends of Jim Ly Ram	1—	THIS BOX IF

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
5/12/09	Paula Feltner 100 water street #402 Des Moines Ia 50309		Food drinks fundraiser	15.00	
5/12/09	Mike Heller 1621 South 50th Place West Des Moines, Fa 5020	66	Fundraiser Food drinks fundraiser	75.00	
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			SUB-TOTAL	\$75.00	·

page of this schedule)

TOTAL (if last

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*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.